Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 1 of 60

| | 1 | United No | | Bank District | | | urt | | | | Volu | ıntary | Petition |
|--|-------------------------------------|-----------------------------|-----------------------------------|---|---|---|---|--|--|-----------------------------------|---|-------------|-----------------|
| Name of Debtor (if individual, enter Last, First, Middle): Decker, Jeffrey J | | | | | | | of Joint Decker, Hea | ebtor (Spouse ather J | e) (Last, Fir | st, Middle): | | | |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): FDBA D&D Masteiffs | | | | | | | | used by the maiden, and | | r in the last 8 ss): | years | | |
| Last four digits of Soc. Sec if more than one, state all) xxx-xx-9608 | c. or Indiv | vidual-Taxpa | ayer I.D. (| (ITIN)/Com | plete EI | N | (if more | our digits o | all) | r Individual | -Taxpayer I.D | . (ITIN) N | o./Complete EIN |
| Street Address of Debtor (I 11009 West State R Winnebago, IL | | Street, City, a | and State) | | ZIP C | | 110 | | State Roa | | Street, City, an | d State): | ZIP Code |
| County of Residence or of Winnebago | the Princ | cipal Place o | f Busines | | <u>61088</u> | | | y of Reside | | Principal F | Place of Busin | ess: | 61088 |
| Mailing Address of Debtor PO Box 524 Winnebago, IL | (if differ | rent from str | eet addres | | ZIP C | | РО | g Address Box 524 inebago | | tor (if differ | ent from stree | t address): | ZIP Code |
| Location of Principal Asset (if different from street add | ts of Bus lress abo | iness Debtor ve): | • | | <u>61088</u> | | | | | | | | 61088 |
| Type of Debtor (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.) Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending: Nature of Business (Check one box) Health Care Business Single Asset Real Estate as de in 11 U.S.C. § 101 (51B) Railroad Stockbroker Commodity Broker Clearing Bank Other Tax-Exempt Entity (Check box, if applicable) Debtor is a tax-exempt organization under Title 26 of the United States | | | e as defi B) | | defined "incurr | the er 7 er 9 er 11 er 12 | Petition is | ly for | tition for R Iain Procee tition for R fonmain Pr | ecognition eding ecognition | | | |
| ☐ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. ☐ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. | | | | eck one b Debto Debto eck if: Debto are les eck all ap A plar Accep | or is a sm or is not a or's aggr ss than \$ oplicable in is bein | regate nonco 62,490,925 (boxes: ug filed with | Chap debtor as definess debtor as entingent liquid amount subjethis petition. | ned in 11 U.S. defined in 11 u.s. defined in 11 ated debts (e. ct to adjustn | otors S.C. § 101(51D) U.S.C. § 101(5 | 1D). owed to inside and every | lers or affiliates) three years therea editors, | | |
| Statistical/Administrative Debtor estimates that full Debtor estimates that, a there will be no funds a | ands will after any available | be available exempt prop | erty is ex | cluded and | adminis | l credito | rs. | | 3.C. § 1120(0). | | IS SPACE IS FO | OR COURT | USE ONLY |
| | _ | 200- 999 | 1,000- 5,000 | 5,001- 10,000 | 10,001- 25,000 | | | 50,001- 100,000 | OVER 100,000 | | | | |
| | 100,001 to 500,000 | | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,0 to \$100 million | 001 \$100 to \$5 millio | 500 | \$500,000,001 to \$1 billion | | | | | |
| | 100,001 to 500,000 | | \$1,000,001 to \$10 | \$10,000,001 to \$50 | \$50,000,0 to \$100 | 001 \$100 to \$5 | | \$500,000,001 to \$1 billion | More than \$1 billion | | | | |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 2 of 60 B1 (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Decker, Jeffrey J Decker, Heather J (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. /s/ Dennis L Leahy December 8, 2014 Signature of Attorney for Debtor(s) (Date) Dennis L Leahy Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment)

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

- Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

(Address of landlord)

B1 (Official Form 1)(04/13) Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s): Decker, Jeffrey J Decker, Heather J

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Jeffrey J Decker

Signature of Debtor Jeffrey J Decker

X /s/ Heather J Decker

Signature of Joint Debtor Heather J Decker

Telephone Number (If not represented by attorney)

December 8, 2014

Date

Signature of Attorney*

X /s/ Dennis L Leahy

Signature of Attorney for Debtor(s)

Dennis L Leahy 1599046

Printed Name of Attorney for Debtor(s)

Dennis L Leahy

Firm Name

One Court Place Suite 203

Rockford, IL 61101

Address

Email: attyleahy@yahoo.com

815 964-9600 Fax: 815 964-9452

Telephone Number

December 8, 2014

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Y

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 4 of 60

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Illinois

| In re | Jeffrey J Decker Heather J Decker | | Case No. | |
|-------|--------------------------------------|-----------|----------|---|
| mic | neather 3 Decker | Debtor(s) | Chapter | 7 |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 5 of 60

| 3 1D (Official Form 1, Exhibit D) (12/09) - Cont. | Page |
|--|--|
| statement.] [Must be accompanied by a motion for a Incapacity. (Defined in 11 U.S.C.) | § 109(h)(4) as impaired by reason of mental illness or |
| • | alizing and making rational decisions with respect to |
| • • | 109(h)(4) as physically impaired to the extent of being |
| | in a credit counseling briefing in person, by telephone, o |
| through the Internet.); ☐ Active military duty in a military c | rombat zone |
| Tretive initially daty in a initially e | ombat zone. |
| ☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in | administrator has determined that the credit counseling this district. |
| I certify under penalty of perjury that the | information provided above is true and correct. |
| Signature of Debtor: | /s/ Jeffrey J Decker |
| _ | Jeffrey J Decker |
| Date: December 8, 2 | 014 |
| | |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 6 of 60

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Illinois

| In re | Jeffrey J Decker Heather J Decker | | Case No. | | |
|-------|--------------------------------------|-----------|----------|---|--|
| | | Debtor(s) | Chapter | 7 | |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 7 of 60

| B 1D (Official Form 1, Exhibit D) (12/09) - Cont. | Page |
|--|--|
| • | inseling briefing because of: [Check the applicable |
| statement.] [Must be accompanied by a motion for a | · - |
| ± • • • | § 109(h)(4) as impaired by reason of mental illness or |
| mental deficiency so as to be incapable of re | alizing and making rational decisions with respect to |
| financial responsibilities.); | |
| ☐ Disability. (Defined in 11 U.S.C. § | 109(h)(4) as physically impaired to the extent of being |
| unable, after reasonable effort, to participate | in a credit counseling briefing in person, by telephone, or |
| through the Internet.); | |
| ☐ Active military duty in a military of | combat zone. |
| ☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in | administrator has determined that the credit counseling this district. |
| I certify under penalty of perjury that the | information provided above is true and correct. |
| Signature of Debtor: | /s/ Heather J Decker |
| C | Heather J Decker |
| Date: December 8, 2 | 2014 |
| | |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 8 of 60

B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

| In re | Jeffrey J Decker, | | Case No. | |
|-------|-------------------|---------|----------|---|
| | Heather J Decker | | | |
| _ | | Debtors | Chapter | 7 |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property | Yes | 1 | 0.00 | | |
| B - Personal Property | Yes | 3 | 19,240.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 0.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 14 | | 115,621.00 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 2 | | | 3,305.00 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 2 | | | 3,275.00 |
| Total Number of Sheets of ALL Schedu | ıles | 27 | | | |
| | To | otal Assets | 19,240.00 | | |
| | | | Total Liabilities | 115,621.00 | |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 9 of 60

B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

| In re | Jeffrey J Decker, | | Case No. | |
|-------|-------------------|---------|----------|---|
| | Heather J Decker | | | |
| _ | | Debtors | Chapter | 7 |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|-----------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00 |
| Student Loan Obligations (from Schedule F) | 35,980.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 35,980.00 |

State the following:

| Average Income (from Schedule I, Line 12) | 3,305.00 |
|--|----------|
| Average Expenses (from Schedule J, Line 22) | 3,275.00 |
| Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14) | 3,862.00 |

State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | 0.00 |
|--|------|------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | 0.00 |
| 4. Total from Schedule F | | 115,621.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | 115,621.00 |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 10 of 60

B6A (Official Form 6A) (12/07)

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather I Decker | |

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

None

Sub-Total > 0.00 (Total of this page)

Total > 0.00

(Report also on Summary of Schedules)

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 11 of 60

B6B (Official Form 6B) (12/07)

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | Type of Property | N O Description and Location of Property E | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|--|--|---|---|
| 1. | Cash on hand | Cash on hand | J | 15.00 |
| 2. | Checking, savings or other financial | Fifth Third Bank checking | Н | 200.00 |
| | accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and | Fifth Third Bank savings | Н | 25.00 |
| | homestead associations, or credit unions, brokerage houses, or cooperatives. | Fifth Third Bank checking | W | 100.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | X | | |
| 4. | Household goods and furnishings, including audio, video, and computer equipment. | Household goods and furnishings | J | 1,500.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | |
| 6. | Wearing apparel. | Wearing apparel | J | 500.00 |
| 7. | Furs and jewelry. | Jewelry | J | 500.00 |
| 8. | Firearms and sports, photographic, and other hobby equipment. | X | | |
| 9. | Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | X | | |
| 10. | Annuities. Itemize and name each issuer. | X | | |

| Sub-Total > | 2,840.00 |
|----------------------|----------|
| (Total of this page) | |

² continuation sheets attached to the Schedule of Personal Property

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 12 of 60

B6B (Official Form 6B) (12/07) - Cont.

| In | re Jeffrey J Decker, Heather J Decker | | | Case No. | |
|-----|---|------------------|--|---|---|
| | | SCHEDUL | Debtors E B - PERSONAL PROPEI (Continuation Sheet) | RTY | |
| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | Pension | | Н | 12,000.00 |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. | Accounts receivable. | Χ | | | |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| | | | | Sub-Tota (Total of this page) | al > 12,000.00 |

Sheet 1 of 2 continuation sheets attached

to the Schedule of Personal Property

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 13 of 60

B6B (Official Form 6B) (12/07) - Cont.

| In re | Jeffrey J Decker, |
|-------|-------------------|
| | Heather I Decker |

|--|

Debtors SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O Description and Location of Property E | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|--|---|---|
| 22. Patents, copyrights, and other intellectual property. Give particulars. | X | | |
| 23. Licenses, franchises, and other general intangibles. Give particulars. | X | | |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories. | 2002 Chrysler Sebring 190,000 miles | J | 1,000.00 |
| | 2000 Dodge Ram pickup truck 125,000 miles | J | 2,000.00 |
| 26. Boats, motors, and accessories. | X | | |
| 27. Aircraft and accessories. | X | | |
| 28. Office equipment, furnishings, and supplies. | Computer | J | 400.00 |
| 29. Machinery, fixtures, equipment, and supplies used in business. | X | | |
| 30. Inventory. | X | | |
| 31. Animals. | 3 dogs | J | 1,000.00 |
| 32. Crops - growing or harvested. Give particulars. | X | | |
| 33. Farming equipment and implements. | X | | |
| 34. Farm supplies, chemicals, and feed. | X | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | |

Sheet $\underline{2}$ of $\underline{2}$ continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

Sub-Total >

Total >

(Total of this page)

4,400.00

19,240.00

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 14 of 60

B6C (Official Form 6C) (4/13)

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: (Check one box)

☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years therea with respect to cases commenced on or after the date of adjustment.)

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption | |
|---|--|----------------------------------|---|--|
| Cash on Hand Cash on hand | 735 ILCS 5/12-1001(b) | 15.00 | 15.00 | |
| <u>Checking, Savings, or Other Financial Accounts, Certif</u> Fifth Third Bank checking | icates of Deposit 735 ILCS 5/12-1001(b) | 200.00 | 200.00 | |
| Fifth Third Bank savings | 735 ILCS 5/12-1001(b) | 25.00 | 25.00 | |
| Fifth Third Bank checking | 735 ILCS 5/12-1001(b) | 100.00 | 100.00 | |
| Household Goods and Furnishings Household goods and furnishings | 735 ILCS 5/12-1001(b) | 1,500.00 | 1,500.00 | |
| Wearing Apparel Wearing apparel | 735 ILCS 5/12-1001(a) | 500.00 | 500.00 | |
| <u>Furs and Jewelry</u> Jewelry | 735 ILCS 5/12-1001(b) | 500.00 | 500.00 | |
| Interests in IRA, ERISA, Keogh, or Other Pension or Pension | rofit Sharing Plans 735 ILCS 5/12-704 | 100% | 12,000.00 | |
| Automobiles, Trucks, Trailers, and Other Vehicles 2002 Chrysler Sebring 190,000 miles | 735 ILCS 5/12-1001(c) | 1,000.00 | 1,000.00 | |
| 2000 Dodge Ram pickup truck 125,000 miles | 735 ILCS 5/12-1001(c) | 2,400.00 | 2,000.00 | |
| Office Equipment, Furnishings and Supplies Computer | 735 ILCS 5/12-1001(b) | 400.00 | 400.00 | |
| Animals 3 dogs | 735 ILCS 5/12-1001(b) | 1,000.00 | 1,000.00 | |

| | 10 0 10 00 | 1001000 |
|--------|------------|-----------|
| Total: | 19 640 00 | 19 240 00 |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Page 15 of 60 Document

B6D (Official Form 6D) (12/07)

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | · |

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D

| CDEDITORIS NAME | C Husband, Wife, Joint, or Community | | | CC | z C | D | AMOUNT OF | |
|--|--------------------------------------|-------------|--|---------------|----------|----------|---|---------------------------------|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONFINGENT | ロヨーマローロロ | DISPUTED | CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
| Account No. | | | | ╹ | T E | | | |
| | | | Value \$ | | D | | | |
| Account No. | | | | | | | | |
| | | | | | | | | |
| | | L | Value \$ | Ш | | | | |
| Account No. | | | Value \$ | | | | | |
| Account No. | | | | | | | | |
| | | | | | | | | |
| | | | Value \$ | | | | | |
| continuation sheets attached | | | S (Total of th | ubto nis p | | | | |
| Total (Report on Summary of Schedules) | | | | | 0.00 | 0.00 | | |
| | | | | | | | | |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 16 of 60

B6E (Official Form 6E) (4/13)

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
|--|
| □ Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relat of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| □ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| ☐ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sal representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| ☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| ☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| □ Deposits by individuals Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| ☐ Taxes and certain other debts owed to governmental units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| ☐ Commitments to maintain the capital of an insured depository institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Feder Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| ☐ Claims for death or personal injury while debtor was intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 17 of 60

B6F (Official Form 6F) (12/07)

| In re | Jeffrey J Decker, Heather J Decker | C | Case No. |
|-------|---------------------------------------|---------|----------|
| _ | | Debtors | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, | C | Н | usband, Wife, Joint, or Community | | С | U | D | |
|--|-----------------|--------|---|-----------------|---------|-----------------------|-----------------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | J C | CONSIDERATION FOR CLAIM. IF CL | ID AIM E. | 0226-2- | NL QU L DA | D I S P U T E D | AMOUNT OF CLAIM |
| Account No. xxx1152 | | | Collection account for Rockford Health System | | T | D A T E D | | |
| Aba 300 1/2 South 2nd Clinton, IA 52733 | | F | | | | | | 197.00 |
| Account No. 7388 | | | Collection account for Wellsfargo | | | | | 137.30 |
| Admin Recovery Llc 9159 Main St Clarence, NY 14031 | | F | | | | | | 0.00 |
| Account No. Allstate P.O. Box 3576 Akron, OH 44309-3576 | | J | premiums | | | | | |
| | | | | | | | | 611.00 |
| Account No. xxx3726 Am Std Asst 100 Cambridge St., Suite 1600 Boston, MA 02114 | | F | Student loan | | | | | |
| | | | | | | <u>L</u> | 1 | 35,980.00 |
| 13 continuation sheets attached | | | (** | Sotal of th | | tota pag | | 36,788.00 |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 18 of 60

B6F (Official Form 6F) (12/07) - Cont.

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

| | I c | Ti | lusband, Wife, Joint, or Community | To | Τu | D | Ī |
|---|----------|-------------|---|-------------|-------------|----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | F V J | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM | CONTINGEN | Q | SPUTED | AMOUNT OF CLAIM |
| Account No. xxx0069 | | | Collection accounts | Т | T E D | | |
| Cach Llc/Square Two Financial GE Capital Retail Bank 4340 S. Monaco St 2nd Floor Denver, CO 80237 | | F | 1 | | | | 9,604.00 |
| Account No. xxx8650 | t | t | collecton account | \dagger | | \vdash | |
| Cach Llc/Square Two Financial GE Capital Retail Bank 4340 S. Monaco St 2nd Floor Denver, CO 80237 | | V | v | | | | 3,546.00 |
| Account No. xxx5020 | | T | collecton account | T | | | |
| Cach Llc/Square Two Financial/ HSBC Bank Nevada NA 4340 S. Monaco St 2nd Floor Denver, CO 80237 | | V | v | | | | 2,431.00 |
| Account No. xxx7344 | t | t | credit purchases | \dagger | | t | |
| Capital One / Menards 90 Christiana Rd New Castle, DE 19720 | | J | | | | | 4,356.00 |
| Account No. xxx8026 | ╁ | t | Utilities | + | + | + | , |
| Comed PO Box 6111 Carol Stream, IL 60197 | | J | | | | | 7,000,00 |
| | | | | \perp | | | 7,026.00 |
| Sheet no. <u>1</u> of <u>13</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of | Sub this | | | 26,963.00 |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 19 of 60

B6F (Official Form 6F) (12/07) - Cont.

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

| | | 1 | | | _ | | _ | |
|--|----------|-------------|---|----|-----------|-------------|----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H W J | sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | CONTLNGEN | DZ1_GD_D∢⊢Ш | DISPUTED | AMOUNT OF CLAIM |
| Account No. xxx8026 | | | utility | | Т | ΤED | | |
| Commonwealth Edison Attn: Bankruptcy Group 3 Lincoln Center Oakbrook Terrace, IL 60181 | | J | | | | ם | | 7,025.00 |
| Account No. | | | various Collection accounts | | | | | |
| Creditors Protection S Po Box 4115 Rockford, IL 61110 | | w | | | | | | 780.00 |
| Account No. xxx7793 | | | credit purchases | | | | | |
| Direct Merchants Bank/HSBC Bank Nevada CACH, LLC Cardmembers Services P.O. Box 5894 Carol Stream, IL 60197-5894 | | J | | | | | | 2,430.00 |
| Account No. | _ | | credit purchases | | | | | |
| Direct Merchants Bank/HSBC Bank Nevada Cach, LLC c/o John C Bonewicz 350 N. Orleans St. #300 Chicago, IL 60654 | | J | | | | | | 0.00 |
| Account No. xxx6974 | \Box | | notice only | | | | | |
| Direct TV c/o Credit Management Lp 4200 International Pkwy Carrollton, TX 75007 | | W | | | | | | 0.00 |
| Sheet no. 2 of 13 sheets attached to Schedule | of | | | Sı | ıbt | ota | l | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total | | | | - 1 | 10,235.00 |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 20 of 60

B6F (Official Form 6F) (12/07) - Cont.

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

| 27.77.77.07.12.77.17.77. | С | Hu | sband, Wife, Joint, or Community | Тс | U | D | |
|---|---------|------------------|---|-----------|-------------|----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | ODEBTOR | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | Q | DISPUTED | AMOUNT OF CLAIM |
| Account No. | | | cable tv | T | T E D | | |
| Direct TV c/o NCO Fin/09 Attn: Bankruptcy 507 Prudential Rd Horsham, PA 19044 | | W | | | | | 208.00 |
| Account No. | | | notice only | T | | | |
| Direct TV P.O. Box 78626 Phoenix, AZ 85062-8626 | | W | | | | | 0.00 |
| Account No. | ┝ | | | + | - | | 0.00 |
| Ebay, Inc. c/o EOS CCA 700 Longwater Dr. Norwell, MA 02061 | | J | | | | | 31.00 |
| Account No. xxx1908 | | | Utilities | + | | | |
| Ferrellgas PO Box 88086 Chicago, IL 60680 | | J | | | | | 2,767.00 |
| Account No. | ╁ | - | notice only | + | _ | \vdash | _,. 57.00 |
| Ferrellgas c/o John C. Williams & Assoc 1612 Northeast Expressway Atlanta, GA 30329 | 1 | J | | | | | 0.00 |
| Sheet no. 3 of 13 sheets attached to Schedule of | _ | _ | <u> </u> | Sub | tota | ıl | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | | | | 3,006.00 |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 21 of 60

B6F (Official Form 6F) (12/07) - Cont.

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

| | - | | | 1. | 1 | 1- | 1 |
|---|-------------|------------------------|---|------------------|-----------------------|------------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | B T O | Hu H W J C | sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTING | LQU | S P U T | AMOUNT OF CLAIM |
| Account No. xxx0069 | R | Ľ | credit purchases | G E N T | I D A T E | D | |
| GE Capital Retail Bank / CACH, LLC c/o Financial Recovery Services P.O. Box 385908 Minneapolis, MN 55438-5908 | | Н | | | D | | 3,627.00 |
| Account No. xxx8650 | T | | credit purchases | | t | T | |
| GE Capital Retail Bank / CACH, LLC c/o Financial Recovery Services P.O. Box 385908 Minneapolis, MN 55438-5908 | | J | | | | | 3,727.00 |
| Account No. xxx2704 | | | credit purchases | \dagger | | | |
| GE Capital Retail Bank/ CACH, LLC c/o Law Firm of Allan C. Smith, PC 1276 Veterans Hwy # E-1 Bristol, PA 19007 | | J | | | | | 3,627.00 |
| Account No. xxx2704 | | | notice only | | | | · |
| GE Capital Retail Bank/ CACH, LLC c/o First Step Group 6300 Shingle Creek Pkwy #220 Brooklyn Center, MN 55430 | | J | | | | | 0.00 |
| Account No. xxx4196 | | | credit purchases | | | | |
| GE Capital Retail Bank/F&F/ CACH, LLC c/o First Step Group 6300 Shingle Creek Pkwy #220 Brooklyn Center, MN 55430 | | J | | | | | 3,727.00 |
| Sheet no. 4 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | • | (Total of | Sub this | | | 14,708.00 |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 22 of 60

B6F (Official Form 6F) (12/07) - Cont.

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

| CREDITOR'S NAME, | | Н | pand, Wife, Joint, or Community | | | D | |
|--|----------|--------|-----------------------------------|----------|-----------|---------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | J H | CONSIDERATION FOR CLAIM. IF CLAIM | ONTINGEN | UNLIQUIDA | ISPUTED | AMOUNT OF CLAIM |
| Account No. | | | utility | Т | T | 1 | |
| Gill's Freeport Disposal Inc. P.O. Box 64 Freeport, IL 61032 | | J | | | D | | 120.00 |
| Account No. | \vdash | l | notice only | | | | 120.00 |
| Gill's Freeport Disposal Inc. c/o ARM Solutions P.O. Box 2929 Camarillo, CA 93011-2929 | | J | | | | | 0.00 |
| Account No. xxx7388 | t | T | credit purchases | | t | | |
| Great Escape/Wells Fargo/Crown Asset Mgm c/o Mercantile Adjustment Bureau, LLC P.O. Box 9016 Buffalo, NY 14231-9016 | | J | | | | | 571.00 |
| Account No. | | | tax preparation | | | | |
| H&R Block P.O. Box 677463 Dallas, TX 75267-7463 | | J | | | | | 326.00 |
| Account No. 7344 | t | H | notice only | + | | | |
| Hsbc/menards PO Box 5263 Carol Stream, IL 60197 | | H | | | | | 0.00 |
| Sheet no5 _ of _13 _ sheets attached to Schedule of | 1_ | _ | | Sub | tot: | a1 | 3.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | | | | 1,017.00 |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 23 of 60

B6F (Official Form 6F) (12/07) - Cont.

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

| | ٦. | 1. | | _ | | | _ | |
|--|----------|-------------|-----------------------------------|-----------|-------|----------|---------------|-----------------|
| CREDITOR'S NAME, | o o | H | usband, Wife, Joint, or Community | ; | | N | D I | |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C N H | CONSIDERATION FOR CLAIM. IF CLAIM | | | LOULDA | I S P U T E D | AMOUNT OF CLAIM |
| Account No. xxx7344 | | | credit purchases | ٦ | ř : | T E | | |
| Hsbc/menards Retail Services P.O. Box 15521 Wilmington, DE 19850-5521 | | H | | | | D | | 4,356.00 |
| Account No. | | | notice only | | | | | |
| Hsbc/Menards/ Mainstreet Acquisition c/o Amsher Collection Services 600 Beacon Pkwy W, #300 Birmingham, AL 35209-3114 | | H | | | | | | 0.00 |
| Account No. xxx3778 | | | Collection account for Cach, LLC | \dagger | | + | | |
| John C. Bonewicz 350 N Orleans St Suite 300 Chicago, IL 60654 | | J | | | | | | 0.00 |
| Account No. | _ | | notice only | + | + | + | | |
| Keybank National Assoc. P.O. Box 94968 Cleveland, OH 44101-4968 | | J | | | | | | 0.00 |
| Account No. | \vdash | | notice only | + | + | \dashv | \dashv | |
| Keybank National Association c/o Allied International Credit Corp 6800 Paragon PI #400 Richmond, VA 23230 | | J | | | | | | 0.00 |
| Sheet no. 6 of 13 sheets attached to Schedule of | | 1 | 1 | Su | | | - 1 | 4,356.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total o | f thi | s pa | age | e) | 4,330.00 |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 24 of 60

B6F (Official Form 6F) (12/07) - Cont.

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

| | Tc | T | lusband, Wife, Joint, or Community | 10 | : Ti | J I | 5 T | |
|---|-----------|-------------|---|----------------|-----------|----------|-----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | F V J | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM | | | N I | S J T E D | AMOUNT OF CLAIM |
| Account No. 3477 | | | Deficiency balance on repossessed 2001 Ford | П | E | <u> </u> | | |
| Keybank Usa Attn: Recovery Payment Processing 4910 Tiedeman Rd Routing Code: 08-01-51-0449 Brooklyn, OH 44144 | | V | V | | |) | | 9,432.00 |
| Account No. xxx8016 | | T | Collection account for Anesthesiologists | | | | 1 | |
| Med Busi Bur 1460 Renaissance Dr Park Ridge, IL 60068 | | V | V | | | | | 121.00 |
| Account No. | ╁ | $^{+}$ | notice only | | | + | \dagger | |
| Med Busi Bur P.O. Box 1219 Park Ridge, IL 60068 | | V | V | | | | | 0.00 |
| Account No. xxx6119 | t | \dagger | Collection account for Good Samaritan | | \dagger | + | \dagger | |
| Mrsi 2250 E Devon Ave Ste 352 Des Plaines, IL 60018 | | V | Hospital V | | | | | 1,116.00 |
| Account No. xxx0817 | \dagger | \dagger | medical | + | + | + | + | • |
| Mutual Management 401 E.State St. Rockford, IL 61104 | | V | V | | | | | 025.22 |
| | _ | | | | | | 4 | 835.00 |
| Sheet no7 of _13 _ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total o | Sul of this | | |) | 11,504.00 |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 25 of 60

B6F (Official Form 6F) (12/07) - Cont.

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

| | С | Нп | sband, Wife, Joint, or Community | С | U | D | |
|---|---------|------------------|---|-----------|-------------|----------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | ODEBTOR | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | Q | SPUTED | AMOUNT OF CLAIM |
| Account No. xxx1969 | | | medical | Т | T E D | | |
| Mutual Management 401 E.State St. Rockford, IL 61104 | | W | | | | | 348.00 |
| Account No. xxx8880 | ┢ | | medical | | H | | |
| Mutual Management 401 E.State St. Rockford, IL 61104 | | W | | | | | 445.00 |
| Account No. | - | | medical | | | | 145.00 |
| Pediatrix-Obstetrix Medical Group 0 P.O. Box 504464 RZ Saint Louis, MO 63150-4464 | | J | medical | | | | 58.00 |
| Account No. xxx4972 | 1 | | Medical services | + | | | |
| Quest Diagnostics PO Box 809403 Chicago, IL 60680-9403 | | J | | | | | 52.00 |
| Account No. | ╁ | | notice only | + | \vdash | _ | 52.30 |
| Quest Diagnostics c/o Credit Collection Services Two Wells Ave. Newton Center, MA 02459 | • | J | | | | | 0.00 |
| Sheet no8 of _13_ sheets attached to Schedule of | | _ | | Sub | tota | <u>1</u> ւ1 | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | | | | 603.00 |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 26 of 60

B6F (Official Form 6F) (12/07) - Cont.

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

| | T _C | ПП | usband, Wife, Joint, or Community | T. | Ιυ | D | |
|---|----------------|-------------|---|-----------|------|---------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C J W | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | COXFLXGEX | Q | I S P U T E D | AMOUNT OF CLAIM |
| Account No. xxx4090 | | | Medical services | T | E | | |
| Radiology Consultants 39020 Eagle Way Chicago, IL 60678 | | J | | | D | | 58.00 |
| Account No. xxx1298 | t | t | Medical services | + | | | |
| Radiology Consultants c/o ATG Credit 1700 W Cortland St. #2 Chicago, IL 60622 | | v | | | | | 42.00 |
| Account No. xxx5002 | ╁ | + | Deficiency balance on repossessed ATV | + | | | |
| Rkfd Bell Cu 4225 Perryville Loves Park, IL 61111 | | v | | | | | 482.00 |
| Account No. xxx2226 | | ╁ | Medical services | + | | | |
| Rockford Anesthesiologists PO Box 4569 Rockford, IL 61110 | | J | | | | | 454.00 |
| Account No. | \dagger | + | notice only | + | + | \vdash | |
| Rockford Anesthesiologists c/o Creditors Protection Service P.O. Box 4115 Rockford, IL 61101 | | J | | | | | 0.00 |
| Sheet no. 9 of 13 sheets attached to Schedule of | | | 1 | Sub | tota | <u> </u> | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | | | | 1,036.00 |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 27 of 60

B6F (Official Form 6F) (12/07) - Cont.

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

| CDEDITORIS VIA G | С | Н | usband, Wife, Joint, or Community | Гс | ī | J D | |
|---|----------|-------------|-----------------------------------|-----------|--------|-------------|----------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A H | DATE OF A DAWAG INCHIDED AND | CONTINGEN | l I | S P U T E D | |
| Account No. xxx5312 | | | Medical services | Т | E | | |
| Rockford Associated Clinical Path PO Box 71082 Chicago, IL 60694 | | J | | | | | 1,079.00 |
| Account No. xxxA395 | \vdash | \vdash | Medical services | | + | + | 1,070.00 |
| Rockford Health Physicians Dept 4701 Carol Stream, IL 60122 | | J | | | | | 126.00 |
| Account No. | ┢ | \vdash | notice only | | + | | |
| Rockford Health System 2400 N. Rockton Avenue Rockford, IL 61103 | | J | | | | | 0.00 |
| Account No. | | | medical | | | | 0.00 |
| Rockford Health System c/o Allied Business Accounts 300-1/2 S. 2nd St. P.O. Box 1600 Clinton, IA 52733-1600 | | J | | | | | 200.00 |
| Account No. xxxE000 | Г | | Medical services | | T | | |
| Rockford Infectious Disease 129 Phelps Ave #508 Rockford, IL 61108 | | J | | | | | 114.00 |
| Sheet no10_ of _13_ sheets attached to Schedule of | | <u> </u> | <u> </u> | Sub | otot | al | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total | | | | 1,519.00 |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 28 of 60

B6F (Official Form 6F) (12/07) - Cont.

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

| | T _C | ш | sband, Wife, Joint, or Community | 10 | Ιυ | D | 1 |
|---|----------------|------------------|---|-----|-------------|---------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | L Q U | 1 | AMOUNT OF CLAIM |
| Account No. xxx6877 | 1 | | Medical services | T | E D | | |
| Rockford Infectious Disease c/o Accounts Receivable Mgmt 7834 N. 2nd St. #5 Machesney Park, IL 61115 | | J | | | | | 113.00 |
| Account No. 7388 | T | | Charge Account | T | T | | |
| Splash Card/WFFNB PO Box 10475 Des Moines, IA 50306 | | Н | | | | | 522.00 |
| Account No. xx0852 | ╁ | \vdash | Medical services | + | + | ╁ | 322.55 |
| Swedish American Hospital PO Box 310283 Des Moines, IA 50331 | | J | | | | | 25.00 |
| Account No. xxx8861 | ╁ | _ | Medical services | + | + | \perp | 20.00 |
| Swedish American Hospital PO Box 1567 Rockford, IL 61110 | | J | | | | | 860.00 |
| Account No. | + | \vdash | notice only | + | + | + | |
| Swedish American Hospital c/o Dennis A. Brebner & Assoc 86 Northpoint Blvd Waukegan, IL 60085-8211 | | J | | | | | 0.00 |
| Sheet no11_ of _13_ sheets attached to Schedule of | | <u> </u> | <u> </u> | Sub | tota | al | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total o | | | | 1,520.00 |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 29 of 60

B6F (Official Form 6F) (12/07) - Cont.

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

| CDEDITORIS MAME | С | Н | usband, Wife, Joint, or Community | С | U | D | |
|--|----------|-------------|---|-------------|-------------|---------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C H H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | L I Q | I S P U T E D | AMOUNT OF CLAIM |
| Account No. | | | medical | Т | T | | |
| Swedish American Medical Group Swedish American MSO 2550 Charles Street Rockford, IL 61108 | | J | | | D | | 946.00 |
| Account No. | | | medical | \dagger | t | | |
| UIC College of Medicine at Rockford 1601 Parkview Ave Rockford, IL 61107 | | J | | | | | 44400 |
| Account No. | | | notice only | + | | | 144.00 |
| UIC College of Medicine at Rockford c/o Creditors Protection Service 308 W. State St. #485 P.O. Box 4115 Rockford, IL 61110-0615 | | J | | | | | 0.00 |
| Account No. | | T | phone service | | | | |
| Vonage c/o Penn Credit P.O. Box 1259, Dept 91047 Oaks, PA 19456 | | J | | | | | 114.00 |
| Account No. xxx0559 | | l | Deficiency balance on repossessed 2001 GMC | \dagger | t | | |
| Wfs Financial/Wachovia Dealer Srvs Po Box 3569 Rancho Cucamonga, CA 91729 | | J | | | | | 4 400 55 |
| | | | | | | | 1,162.00 |
| Sheet no. <u>12</u> of <u>13</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of | Sub this | | | 2,366.00 |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 30 of 60

B6F (Official Form 6F) (12/07) - Cont.

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | <u>.</u> |

| | _ | | | <u> </u> | | | _ | |
|--|----------|--------------|---|----------|-----------|------|-----------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | Hu H C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | 7 04 | D I S P U T E D | AMOUNT OF CLAIM |
| Account No. | | | notice only | ין | 1 E | | | |
| Wfs Financial/Wachovia Dealer Srvs c/o Vital Recovery Services P.O. Box 923748 Peachtree Corners, GA 30010-3748 | | J | | | | | | 0.00 |
| Account No. | | | | | | | | |
| | | | | | | | | |
| Account No. | | | | | | | | |
| | | | | | | | | |
| Account No. | | | | | | | | |
| | | | | | | | | |
| Account No. | | | | | + | 1 | | |
| | | | | | | | | |
| | | | | | | | | |
| Sheet no. <u>13</u> of <u>13</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of | Sul | | | - 1 | 0.00 |
| | | | (Report on Summary of S | | To edu | | | 115,621.00 |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 31 of 60

B6G (Official Form 6G) (12/07)

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 32 of 60

B6H (Official Form 6H) (12/07)

| In re | Jeffrey J Decker, | Case No. |
|-------|-------------------|----------|
| | Heather J Decker | |

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 33 of 60

| Fill | in this information to ident | tify your ca | ise: | | | | | | | | |
|----------|--|---------------|---|-----------------------------------|-------------|-------|-----------------|-------------------|------------|------------------------|----------|
| Del | btor 1 Jeff | rey J De | ker | | | _ | | | | | |
| | btor 2 Hear | ther J De | ecker | | | _ | | | | | |
| Uni | ited States Bankruptcy Co | ourt for the: | NORTHERN DISTRIC | CT OF ILLINOIS | | _ | | | | | |
| _ | se number nown) | | | | | | | mended pplemer | nt showin | g post-petition | |
| <u>O</u> | fficial Form B 6 | <u> </u> | | | | | MM / | / DD/ YY | /YY | | |
| S | chedule I: You | ır Inco | ome | | | | | | | | 12/1 |
| atta | use. If you are separated that a separate sheet to the separate sheet sh | his form. (| | | | | I case numb | ber (if k | nown). A | | |
| | If you have more than o | ne iob. | | ■ Employed | | | | l Employ | yed | <u> </u> | |
| | attach a separate page information about addition | with | Employment status | ☐ Not employed | | | | Not em | | | |
| | employers. | | Occupation | 18 Years | | | <u>H</u> | omema | aker | | |
| | Include part-time, seaso self-employed work. | onal, or | Employer's name | UPS | | | | | | | |
| | Occupation may include or homemaker, if it appli | | Employer's address | 103 N Commerc Freeport, IL 610 | | | | | | | |
| | | | How long employed the | here? <u>Dispato</u> | :h | | | | | | |
| Pa | rt 2: Give Details A | bout Mon | thly Income | | | | | | | | |
| | imate monthly income as use unless you are separa | | ate you file this form. If y | you have nothing to re | eport for | any l | line, write \$0 |) in the s | space. Inc | clude your noi | n-filing |
| | ou or your non-filing spous e space, attach a separate | | | embine the information | n for all e | emplo | oyers for tha | it person | on the li | nes below. If | you need |
| | | | | | | | For Debtor | r 1 | | btor 2 or ng spouse | |
| 2. | | | y, and commissions (be alculate what the monthly | | 2. | \$ | 2,21 | 7.00 | \$ | 0.00 | |
| 3. | Estimate and list mont | thly overti | me pay. | | 3. | +\$ | | 0.00 | +\$ | 0.00 | |
| 4. | Calculate gross Incom | ne. Add lin | e 2 + line 3. | | 4. | \$ | 2,217.0 | 00 | \$ | 0.00 | |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 34 of 60

Jeffrey J Decker

Debtor 1

Heather J Decker Debtor 2 Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 2.217.00 0.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 255.00 0.00 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 0.00 5e Insurance 5e \$ \$ 0.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5g. **Union dues** 5g. \$ 0.00 0.00 Other deductions. Specify: United Way 5h.+ 13.00 0.00 **Health Savings Acct** 208.00 0.00 Flex Acct 81.00 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 557.00 6 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. 1,660.00 0.00 8 List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. 0.00 0.00 8h. Interest and dividends 8h 0.00 0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 **Unemployment compensation** 8d. 8d. 0.00 0.00 8e. **Social Security** 8e. 0.00 0.00 Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Illinois DCFS 8f. Specify: 0.00 1.645.00 8q. Pension or retirement income 8q. 0.00 0.00 8h.+ \$ \$ Other monthly income. Specify: 0.00 0.00 9 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 0.00 1,645.00 10. Calculate monthly income. Add line 7 + line 9. 10. 1.660.00 \$ 1.645.00 3.305.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 3.305.00 12 applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain:

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 35 of 60

| Fill | in this <u>informa</u> | ation to identify y | our c <u>ase:</u> | | | | | |
|-----------|-------------------------------|--|-------------------|---|---|------------|--------------------------------------|---|
| | otor 1 | Jeffrey J De | | | | Chec | ck if this is: | |
| | | | | | | | An amended filing | |
| | otor 2 ouse, if filing) | Heather J D | ecker | | | | A supplement shown 13 expenses as of | wing post-petition chapter the following date: |
| Unit | ed States Bank | ruptcy Court for the | : NORTH | HERN DISTRICT OF ILLIN | OIS | - | MM / DD / YYYY | |
| Cas | e number | | | | | | A separate filing fo | r Debtor 2 because Debto |
| (If k | nown) | | | | | _ | 2 maintains a sepa | arate household |
| Of | fficial Fo | orm B 6J | | | | | | |
| S | chedule | J: Your | <u> </u> | nses | | | | 12/ |
| info | ormation. If n | | eded, atta | . If two married people ar ich another sheet to this n. | | | | |
| Par 1. | t 1: Desc | ribe Your Hous | ehold | | | | | |
| ١. | □ No. Go t | | | | | | | |
| | | | in a separ | ate household? | | | | |
| | | Jo | - | | | | | |
| | ` | | st file a sep | parate Schedule J. | | | | |
| 2. | Do you hav | e dependents? | □No | | | | | |
| | Do not list Debtor 2. | Debtor 1 and | ■ Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state dependents | | | | Minor Son | | 1 yr | □ No ■ Yes |
| | aoponaomo | namo. | | | | | | □ No |
| | | | | | Minor Son | | 7 yrs | Yes |
| | | | | | Minor Son | | 13 yrs | □ No ■ Yes |
| | | | | | - | | | □ No |
| | | | | | Adult Son | | 18 yrs | ■ Yes □ No |
| | | | | | Adult Daughte | er | 19 yrs | ■ Yes |
| 3. | expenses of | penses include of people other t ad your depende | than | No Yes | | | | |
| Par | t 2: Estin | nate Your Ongo | ina Month | lv Expenses | | | | |
| exp | imate your e | xpenses as of y a date after the | our bankr | uptcy filing date unless y y is filed. If this is a supp | | | | |
| | | | | government assistance i | | | | |
| | value of suc ficial Form 6 | | nd have inc | cluded it on Schedule I:) | our Income | | Your exp | enses |
| 4. | | or home owners nd any rent for th | | ses for your residence. In print lot. | nclude first mortgage | e 4. \$ | S | 700.00 |
| | If not inclu | ded in line 4: | | | | | | |
| | 4a. Real | estate taxes | | | | 4a. \$ | 3 | 0.00 |
| | • | erty, homeowner | - | | | 4b. \$ | | 0.00 |
| | | | | upkeep expenses | | 4c. \$ | | 0.00 |
| | 4d. Home | eowner's associa | tion or con | aominium dues | | 4d. \$ |) | 0.00 |

5. \$

0.00

Additional mortgage payments for your residence, such as home equity loans

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 36 of 60

| ebtor 1 | Jettrey J | | | | |
|---------|----------------|--|-------------------|--------------------|----------------------------|
| ebtor 2 | Heather | J Decker | Case num | ber (if known) | |
| l Itil | ities: | | | | |
| 6a. | | heat, natural gas | 6a. | \$ | 350.00 |
| 6b. | Water, sev | ver, garbage collection | 6b. | \$ | 0.00 |
| 6c. | Telephone | e, cell phone, Internet, satellite, and cable services | 6c. | \$ | 255.00 |
| 6d. | Other. Spe | ecify: | 6d. | \$ | 0.00 |
| Foc | | ekeeping supplies | 7. | \$ | 800.00 |
| | | hildren's education costs | 8. | \$ | 50.00 |
| | | ry, and dry cleaning | 9. | \$ | 50.00 |
| | • | roducts and services | 10. | \$ | 50.00 |
| | - | ntal expenses | 11. | · - | 100.00 |
| | | Include gas, maintenance, bus or train fare. | | · — | 100.00 |
| | not include ca | | 12. | \$ | 300.00 |
| Ent | ertainment, | clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 |
| Cha | aritable cont | ributions and religious donations | 14. | \$ | 300.00 |
| Ins | urance. | | | | |
| | | surance deducted from your pay or included in lines 4 or 20. | | _ | |
| | . Life insura | | 15a. | | 0.00 |
| | . Health ins | | 15b. | | 0.00 |
| | . Vehicle ins | | 15c. | | 120.00 |
| | | rance. Specify: | 15d. | \$ | 0.00 |
| | | clude taxes deducted from your pay or included in lines 4 or 20. | | | |
| • | ecify: | | 16. | \$ | 0.00 |
| | | ease payments: | 47- | c | 2.22 |
| | | ents for Vehicle 1 | 17a. | | 0.00 |
| | | ents for Vehicle 2 | 17b. | | 0.00 |
| | . Other. Spe | | 17c. | | 0.00 |
| | l. Other. Spe | | 17d. | \$ | 0.00 |
| | | of alimony, maintenance, and support that you did not report a | ı s 18. | \$ | 0.00 |
| | | your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 6I). | | \$ | 0.00 |
| | ecify: | you make to support outers who do not live with you. | 19. | <u> </u> | 0.00 |
| | | erty expenses not included in lines 4 or 5 of this form or on ScI | | our Income | |
| | | s on other property | 20a. | | 0.00 |
| | . Real estat | | 20b. | | 0.00 |
| | | nomeowner's, or renter's insurance | 20c. | | 0.00 |
| | | ice, repair, and upkeep expenses | 20d. | | 0.00 |
| | | er's association or condominium dues | 20e. | · | 0.00 |
| | | animal expense | | +\$ | 200.00 |
| | | · | | | |
| | | xpenses. Add lines 4 through 21. | 22. | \$ | 3,275.00 |
| | - | r monthly expenses. | | | |
| | • | monthly net income. | 22 | • | |
| | | 12 (your combined monthly income) from Schedule I. | 23a. | | 3,305.00 |
| 23b | . Copy your | monthly expenses from line 22 above. | 23b. | -\$ | 3,275.00 |
| 20. | Cubination | our monthly over an and from your monthly in an an | | | |
| ∠3C | | our monthly expenses from your monthly income. is your <i>monthly net income</i> . | 23c. | \$ | 30.00 |
| | you expect a | an increase or decrease in your expenses within the year after | you file this | | |
| | | u expect to finish paying for your car loan within the year or do you expect yo terms of your mortgage? | ui mortgage | payment to increas | e or decrease decause of a |
| | | tomo or your mongago. | | | |
| - | | | | | |
| | Yes. olain: | | | | |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 37 of 60

B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Northern District of Illinois

| In re | Jeffrey J Decker Heather J Decker | | | |
|-------|--------------------------------------|-----------|---------|---|
| | | Debtor(s) | Chapter | 7 |

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

| | I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting sheets, and that they are true and correct to the best of my knowledge, information, and belief. | | | 29 |
|------|--|-----------|--|----|
| Date | December 8, 2014 | Signature | /s/ Jeffrey J Decker Jeffrey J Decker Debtor | |
| Date | December 8, 2014 | Signature | /s/ Heather J Decker Heather J Decker | |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Joint Debtor

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 38 of 60

B7 (Official Form 7) (04/13)

United States Bankruptcy Court Northern District of Illinois

| In re | Jeffrey J Decker Heather J Decker | | | |
|-------|--------------------------------------|-----------|---------|---|
| | | Debtor(s) | Chapter | 7 |
| | | | | |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT | SOURCE |
|-------------|------------------------------|
| \$20,921.00 | 2012 |
| | Husband's earnings |
| \$21,593.00 | 2013: Husband's earnings |
| \$20,000.00 | 2014 YTD: Husband's earnings |

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 39 of 60

| 37 | (Official | Form | 7) | (04/13) |
|----|-----------|------|----|---------|
| -, | (01110141 | | ٠, | (0.710 |

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE **\$16,450.00 2014 YTD**

Illinois DCFS payments

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS
OF CREDITOR
DATES OF
PAYMENTS
AMOUNT PAID
OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
TRANSFERS TRANSFERS OWING

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR AND CASE NUMBER PROCEEDING AND LOCATION DISPOSITION Cach, LLC vs Decker collection Winnebago County, IL judgment

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 40 of 60

B7 (Official Form 7) (04/13)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 41 of 60

B7 (Official Form 7) (04/13)

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 2014

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

Dennis L Leahy One Court Place Suite 203 Rockford, IL 61101

2014

credit counseling

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

\$900

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Page 42 of 60 Document

B7 (Official Form 7) (04/13)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 3505 N Winnebago Winnebago, IL

NAME USED Jeffrey J Decker **Heather J Decker** DATES OF OCCUPANCY 2005 through October 2011

P.O. Box 524 Winnebago IL 61088

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

DATE OF

NAME AND ADDRESS OF SITE NAME AND ADDRESS **GOVERNMENTAL UNIT** NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL** SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

ENVIRONMENTAL

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 43 of 60

B7 (Official Form 7) (04/13)

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

None

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 44 of 60

B7 (Official Form 7) (04/13)

7

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 45 of 60

B7 (Official Form 7) (04/13)

8

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date December 8, 2014

Signature Jeffrey J Decker
Debtor

Date December 8, 2014

Signature /s/ Heather J Decker
Heather J Decker
Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 46 of 60

B8 (Form 8) (12/08)

United States Bankruptcy Court Northern District of Illinois

| In re | Jeffrey J Decker Heather J Decker | | | Case No. | |
|-----------------|---|--------------------------------|--|---|------------------------|
| | - Housilot o Doonet | | Debtor(s) | Chapter 7 | |
| PART | CHAPTER 2 A - Debts secured by proper property of the estate. Atta | | nust be fully comple | | |
| Propert | ty No. 1 | | | | |
| Credit -NONE | tor's Name: E- | | Describe Property | Securing Debt: | |
| - | ty will be (check one): Surrendered | ☐ Retained | | | |
| | ning the property, I intend to (c Redeem the property Reaffirm the debt Other. Explain | | oid lien using 11 U.S.C | C. § 522(f)). | |
| | ty is (check one): Claimed as Exempt | | ☐ Not claimed as ex | empt | |
| | B - Personal property subject to additional pages if necessary.) | o unexpired leases. (All three | e columns of Part B m | ust be completed for | each unexpired lease. |
| Propert | ty No. 1 | | | | |
| Lessor | ''s Name: E- | Describe Leased Pi | roperty: | Lease will be Assur U.S.C. § 365(p)(2): ☐ YES | |
| persona | re under penalty of perjury that al property subject to an unex | | /s/ Jeffrey J Decker Jeffrey J Decker Debtor | roperty of my estate | securing a debt and/or |
| Date _ | December 8, 2014 | Signature | /s/ Heather J Decker | | |

Joint Debtor

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 47 of 60

United States Bankruptcy Court Northern District of Illinois

| Jeffrey J Decker Heather J Decker | | Case No. | |
|--|--|---|---|
| | Debtor(s) | Chapter | 7 |
| DISCLOSURE OF COMP | PENSATION OF ATTO | RNEY FOR DI | EBTOR(S) |
| aid to me within one year before the filing of the per | tition in bankruptcy, or agreed to b | e paid to me, for serv | |
| | | | 900.00 |
| Prior to the filing of this statement I have receiv | ed | \$ | 900.00 |
| Balance Due | | \$ | 0.00 |
| he source of the compensation paid to me was: | | | |
| ■ Debtor □ Other (specify): | | | |
| The source of compensation to be paid to me is: | | | |
| ■ Debtor □ Other (specify): | | | |
| I have not agreed to share the above-disclosed co | ompensation with any other person | unless they are mem | bers and associates of my law firm. |
| | | | |
| n return for the above-disclosed fee, I have agreed to | o render legal service for all aspect | s of the bankruptcy | case, including: |
| Preparation and filing of any petition, schedules, s Representation of the debtor at the meeting of cre [Other provisions as needed] | statement of affairs and plan which ditors and confirmation hearing, an | n may be required; and any adjourned hea | urings thereof; |
| reaffirmation agreements and applica | ations as needed; preparation | and filing of mot | ions pursuant to 11 USC |
| by agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding. | fee does not include the following dischargeability actions, judi | g service: cial lien avoidanc | es, relief from stay actions or |
| | CERTIFICATION | | |
| certify that the foregoing is a complete statement of inkruptcy proceeding. | any agreement or arrangement for | payment to me for r | representation of the debtor(s) in |
| December 8, 2014 | | ıy | |
| | Dennis L Leahy | | |
| | | Suite 203 | |
| | Rockford, IL 6110 | 01 | |
| | | | |
| | DISCLOSURE OF COMP Tursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule aid to me within one year before the filing of the pe ehalf of the debtor(s) in contemplation of or in connormal For legal services, I have agreed to accept Prior to the filing of this statement I have receive Balance Due The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation to the agreement, together with a list of the in return for the above-disclosed fee, I have agreed to an and filing of any petition, schedules, and Preparation and filing of any petition and petition and petition and petition | Debtor(s) Disclosure of Compensation of Attol ursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the atte aid to me within one year before the filing of the petition in bankruptcy, or agreed to be half of the debtor(s) in contemplation of or in connection with the bankruptcy case is For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due the source of the compensation paid to me was: Debtor □ Other (specify): Thave agreed to share the above-disclosed compensation with any other person I have agreed to share the above-disclosed compensation with a person or persons or copy of the agreement, together with a list of the names of the people sharing in the nore truth for the above-disclosed fee, I have agreed to render legal service for all aspect Analysis of the debtor's financial situation, and rendering advice to the debtor in det Preparation and filing of any petition, schedules, statement of affairs and plan which Representation of the debtor at the meeting of creditors and confirmation hearing, at [Other provisions as needed] Negotiations with secured creditors to reduce to market value; ext reaffirmation agreements and applications as needed; preparation 522(f)(2)(A) for avoidance of liens on household goods. To gareement with the debtor(s), the above-disclosed fee does not include the following Representation of the debtors in any dischargeability actions, judi any other adversary proceeding. CERTIFICATION CERTIFICATION CERTIFICATION Dennis L Leah | Debtor(s) Case No. Chapter Disclosure of Compensation of Attorney For Discussion to the above-aid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for serve that of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due Balance Due Other (specify): The source of the compensation paid to me was: Debtor Other (specify): Thave not agreed to share the above-disclosed compensation with any other person unless they are mem copy of the agreement, together with a list of the names of the people sharing in the compensation is attain return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy of the debtor's financial situation, and rendering advice to the debtor in determining whether to Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hea. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning reaffirmation agreements and applications as needed; preparation and filing of mot 522(f)(2)(A) for avoidance of liens on household goods. Ye gareement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidance any other adversary proceeding. CERTIFICATION certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for inkruptcy proceeding. December 8, 2014 Plennis L Leahy Dennis L Leahy |

DENNIS L. LEAHY Attorney At Law One Court Place Suite 203 Rockford, IL 61101 815/964-9600

CONTRACT FOR CHAPTER 7 BANKRUPTCY

| This agreement is executed this 15th day of March, 2013. |
|--|
| Type of Bankruptcy: |
| Client retains Attorney Dennis L. Leahy to file a Chapter 7 bankruptcy. |
| Services Provided by Attorney: |
| Contingent upon being paid for the services as specified below, the attorney shall provide the following legal services for the client: Preparation and filing of Chapter 7 Petition in Bankruptcy. |
| Fees: |
| The base fee for the filing of the bankruptcy is \$, the filing fee \$306.00, and the credit report is \$, for a total of \$, to be paid prior to filing. The amount of the filing fee may increase, as determined by Congress. \$\frac{3}{3}\frac{1}{3}\frac\ |
| Additional costs required on a case by case basis include: |
| Mandatory prepetition credit counseling and post petition financial education. Asset verification report (when required by attorney) |
| If the fees are not paid as stated above and as a result the amount of legal service to be provided by the attorney is increased, the fee shall be increased accordingly to compensate the Attorney for the additional time and expense in providing the legal services. |
| Terms of Payment: |
| The fees shall be paid in full prior to the filing of the bankruptcy. Client has paid \$ as a retainer fee. This amount has been earned upon receipt by the attorney and is non-refundable. No earned portion of any fee is refundable. |
| Services Not Provided Under the Base Fee: |

Representation does not include defense of discharge or dischargeability proceedings, redemption proceedings, dismissal proceedings, reinstatement proceedings, judicial lien avoidances, post-petition amendments, relief from stay actions or other adversary proceedings or attendance at continued meeting of creditors, preparation of motion to approve reaffirmation agreement.

Compensation for Services Not Covered Under Base Fee:

- 1. Fees for additional services shall be paid at \$250.00 per hour plus costs (when applicable)
- 2. \$75.00 for preparation and filing of each amendment to the bankruptcy.
- 3. \$75.00 for preparation and filing of motion for court approval of reaffirmation agreement and attendance at hearing if required by the court.
- 4. \$500.00 plus filing fee for motion to reopen bankruptcy.

The client understands that if the client does not pay the fees as set forth above, the attorney has no obligation to provide the services.

Clients Obligations:

- 1. To pay the fees as set forth above.
- 2. To provide accurately, honestly and in a timely manner, all of the information including all documents necessary to prepare and file the bankruptcy.
- 3. To satisfy prepetition credit counseling and post-petition financial education requirements.
- 4. To keep the attorney advised of the clients address and telephone number.
- 5. To attend the 341 Meeting of Creditors and other hearings set in the case as advised by the attorney.
- 6. To provide any information requested of the client by the Bankruptcy Trustee, the U.S. Trustee, or any other party in interest, unless the court rules that the client is not required to provide the information.
- 7. To respond immediately to any request of the client by the attorney or the attorney's staff.
- 8. Attorney is authorized to disburse from his Client Trust Account, when applicable, funds for payment of filing fees, costs, attorney fees and refunds.

Client acknowledges receipt of a copy of this agreement.

Dennis I Leahy

Client

We are a debt relief agency. We help people file for bankruptcy relief under the Bankruptcy Code

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 51 of 60

Form B 201A, Notice to Consumer Debtor(s)

Page 2

Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 52 of 60

B 201B (Form 201B) (12/09)

United States Bankruptcy Court Northern District of Illinois

| In re | Jeffrey J Decker Heather J Decker | D.L. | Case No. | | |
|---------|--------------------------------------|--------------------------------------|-------------------------------|----------|----------|
| | | Debtor(s | S) Chapter | | |
| Code. | | 2(b) OF THE BA Certification of I | | · · | nkruptcy |
| - | y J Decker er J Decker | X /s | / Jeffrey J Decker | December | 8, 2014 |
| Printed | d Name(s) of Debtor(s) | Si | gnature of Debtor | Date | |
| Case N | No. (if known) | X /s | Heather J Decker | December | 8, 2014 |
| | | Si | gnature of Joint Debtor (if a | ny) Date | |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Case 14-83641 Doc 1 Filed 12/08/14 Entered 12/08/14 14:00:03 Desc Main Document Page 53 of 60

United States Bankruptcy Court Northern District of Illinois

| In re | Jeffrey J Decker Heather J Decker | | Case No. | |
|-------|---|--|----------------------|------------------------|
| | Tiediner o Beorei | Debtor(s) | Chapter 7 | |
| | V | ERIFICATION OF CREDITOR M | IATRIX | |
| | | Number of | Creditors: | 65 |
| | The above-named Debtor(s (our) knowledge. | s) hereby verifies that the list of credit | tors is true and con | rect to the best of my |
| Date: | December 8, 2014 | /s/ Jeffrey J Decker | | |
| | | Jeffrey J Decker Signature of Debtor | | |
| Date: | December 8, 2014 | /s/ Heather J Decker | | |
| | | Heather J Decker Signature of Debtor | | |

Aba
300 1/2 South 2nd
Clinton, IA 52733

Admin Recovery Llc 9159 Main St Clarence, NY 14031

Allstate P.O. Box 3576 Akron, OH 44309-3576

Am Std Asst 100 Cambridge St., Suite 1600 Boston, MA 02114

Cach Llc/Square Two Financial GE Capital Retail Bank 4340 S. Monaco St 2nd Floor Denver, CO 80237

Cach Llc/Square Two Financial GE Capital Retail Bank 4340 S. Monaco St 2nd Floor Denver, CO 80237

Cach Llc/Square Two Financial/ HSBC Bank Nevada NA 4340 S. Monaco St 2nd Floor Denver, CO 80237

Capital One / Menards 90 Christiana Rd New Castle, DE 19720

Comed PO Box 6111 Carol Stream, IL 60197

Commonwealth Edison Attn: Bankruptcy Group 3 Lincoln Center Oakbrook Terrace, IL 60181 Creditors Protection S Po Box 4115 Rockford, IL 61110

Direct Merchants Bank/HSBC Bank Nevada CACH, LLC Cardmembers Services P.O. Box 5894 Carol Stream, IL 60197-5894

Direct Merchants Bank/HSBC Bank Nevada Cach, LLC c/o John C Bonewicz 350 N. Orleans St. #300 Chicago, IL 60654

Direct TV c/o Credit Management Lp 4200 International Pkwy Carrollton, TX 75007

Direct TV c/o NCO Fin/09 Attn: Bankruptcy 507 Prudential Rd Horsham, PA 19044

Direct TV P.O. Box 78626 Phoenix, AZ 85062-8626

Ebay, Inc. c/o EOS CCA 700 Longwater Dr. Norwell, MA 02061

Ferrellgas PO Box 88086 Chicago, IL 60680

Ferrellgas c/o John C. Williams & Assoc 1612 Northeast Expressway Atlanta, GA 30329 GE Capital Retail Bank / CACH, LLC c/o Financial Recovery Services P.O. Box 385908 Minneapolis, MN 55438-5908

GE Capital Retail Bank / CACH, LLC c/o Financial Recovery Services P.O. Box 385908 Minneapolis, MN 55438-5908

GE Capital Retail Bank/ CACH, LLC c/o Law Firm of Allan C. Smith, PC 1276 Veterans Hwy # E-1 Bristol, PA 19007

GE Capital Retail Bank/ CACH, LLC c/o First Step Group 6300 Shingle Creek Pkwy #220 Brooklyn Center, MN 55430

GE Capital Retail Bank/F&F/ CACH, LLC c/o First Step Group 6300 Shingle Creek Pkwy #220 Brooklyn Center, MN 55430

Gill's Freeport Disposal Inc. P.O. Box 64 Freeport, IL 61032

Gill's Freeport Disposal Inc. c/o ARM Solutions P.O. Box 2929 Camarillo, CA 93011-2929

Great Escape/Wells Fargo/Crown Asset Mgm c/o Mercantile Adjustment Bureau, LLC P.O. Box 9016 Buffalo, NY 14231-9016

H&R Block P.O. Box 677463 Dallas, TX 75267-7463

Hsbc/menards PO Box 5263 Carol Stream, IL 60197 Hsbc/menards Retail Services P.O. Box 15521 Wilmington, DE 19850-5521

Hsbc/Menards/ Mainstreet Acquisition c/o Amsher Collection Services 600 Beacon Pkwy W, #300 Birmingham, AL 35209-3114

John C. Bonewicz 350 N Orleans St Suite 300 Chicago, IL 60654

Keybank National Assoc. P.O. Box 94968 Cleveland, OH 44101-4968

Keybank National Association c/o Allied International Credit Corp 6800 Paragon Pl #400 Richmond, VA 23230

Keybank Usa Attn: Recovery Payment Processing 4910 Tiedeman Rd Routing Code: 08-01-51-0449 Brooklyn, OH 44144

Med Busi Bur 1460 Renaissance Dr Park Ridge, IL 60068

Med Busi Bur P.O. Box 1219 Park Ridge, IL 60068

Mrsi 2250 E Devon Ave Ste 352 Des Plaines, IL 60018

Mutual Management 401 E.State St. Rockford, IL 61104 Mutual Management 401 E.State St. Rockford, IL 61104

Mutual Management 401 E.State St. Rockford, IL 61104

Pediatrix-Obstetrix Medical Group 0 P.O. Box 504464 RZ Saint Louis, MO 63150-4464

Quest Diagnostics PO Box 809403 Chicago, IL 60680-9403

Quest Diagnostics c/o Credit Collection Services Two Wells Ave. Newton Center, MA 02459

Radiology Consultants 39020 Eagle Way Chicago, IL 60678

Radiology Consultants c/o ATG Credit 1700 W Cortland St. #2 Chicago, IL 60622

Rkfd Bell Cu 4225 Perryville Loves Park, IL 61111

Rockford Anesthesiologists PO Box 4569 Rockford, IL 61110

Rockford Anesthesiologists c/o Creditors Protection Service P.O. Box 4115 Rockford, IL 61101 Rockford Associated Clinical Path PO Box 71082 Chicago, IL 60694

Rockford Health Physicians Dept 4701 Carol Stream, IL 60122

Rockford Health System 2400 N. Rockton Avenue Rockford, IL 61103

Rockford Health System c/o Allied Business Accounts 300-1/2 S. 2nd St. P.O. Box 1600 Clinton, IA 52733-1600

Rockford Infectious Disease 129 Phelps Ave #508 Rockford, IL 61108

Rockford Infectious Disease c/o Accounts Receivable Mgmt 7834 N. 2nd St. #5 Machesney Park, IL 61115

Splash Card/WFFNB PO Box 10475 Des Moines, IA 50306

Swedish American Hospital PO Box 310283 Des Moines, IA 50331

Swedish American Hospital PO Box 1567 Rockford, IL 61110

Swedish American Hospital c/o Dennis A. Brebner & Assoc 86 Northpoint Blvd Waukegan, IL 60085-8211 Swedish American Medical Group Swedish American MSO 2550 Charles Street Rockford, IL 61108

UIC College of Medicine at Rockford 1601 Parkview Ave Rockford, IL 61107

UIC College of Medicine at Rockford c/o Creditors Protection Service 308 W. State St. #485 P.O. Box 4115 Rockford, IL 61110-0615

Vonage c/o Penn Credit P.O. Box 1259, Dept 91047 Oaks, PA 19456

Wfs Financial/Wachovia Dealer Srvs Po Box 3569 Rancho Cucamonga, CA 91729

Wfs Financial/Wachovia Dealer Srvs c/o Vital Recovery Services P.O. Box 923748
Peachtree Corners, GA 30010-3748